

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing      OR      ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

<b>Attorney Docket Number</b>	6680.040
<b>First Named Inventor</b>	William Hildebrand
<b>COMPLETE IF KNOWN</b>	
<b>Application Number</b>	Not Yet Assigned
<b>Filing Date</b>	Herewith
<b>Group Art Unit</b>	Unknown
<b>Examiner Name</b>	Not Yet Assigned

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**SOLUBLE HLA LIGAND DATABASE UTILIZING PREDICTIVE ALGORITHMS AND METHODS OF MAKING AND USING SAME**

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/270,357 09/974,366 10/022,066	02/21/2001 10/10/2001 12/18/2001	

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.**DECLARATION — Utility or Design Patent Application**Direct all correspondence to: ☐ Customer Number or Bar Code Label  OR ☒ Correspondence address below**Name** Douglas J. Sorocco**Address** Dunlap, Coddling & Rogers, P.C.**Address** 9400 North Broadway, Suite 420**City** Oklahoma City**State** OK**ZIP** 73114**Country** USA**Telephone** (405) 478-5344**Fax** (405) 478-5349

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR :**☐ A petition has been filed for this unsigned inventor**Given Name****(first and middle [if any])**

William

**Family Name****or Surname**

Hildebrand

**Inventor's  
Signature****Date****Residence: City** Edmond**State** OK**Country** USA**Citizenship** USA**Mailing Address** 900 Northcreek Drive**Mailing Address****City** Edmond**State** OK**ZIP** 73034**Country** USA**NAME OF SECOND INVENTOR:**☐ A petition has been filed for this unsigned inventor**Given Name****(first and middle [if any])**

Kiley R.

**Family Name****or Surname**

Prilliman

**Inventor's  
Signature****Date****Residence: City** San Diego**State** CA**Country** USA**Citizenship** USA**Mailing Address** 9650 Carroll Cyn. Rd., #G1**Mailing Address****City** San Diego**State** CA**ZIP** 92126**Country** USAAdditional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page 1 of 1
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Heather D.		Hickman	
Inventor's Signature			Date
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City Oklahoma City	State OK	ZIP 73118	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.